

## THIRD PARTY PROPOSITION PLAYER SERVICES REGISTRATION SUPPLEMENTAL INFORMATION (CGCC – 436)

Type or print (in ink) all information requested on this supplemental form. If additional space is needed, please note response on a separate sheet of paper and attach to this form.

SECTI	ON 1: APPLICANT PERSONAL HISTORY	NFORMATION
Applica	nt's Full Legal Name:	Gender: Male ☐ Female ☐
	First	MI Last
Applica	nt's Mailing Address:	
Applica	Street nt's Telephone Number:	City State Zip Code Applicant's Facsimile Number (if applicable):
(	)	( )
Data of	Direkto.	*Consist Consusity Numbers
Date of	Birtn:	*Social Security Number:
Please	indicate answers to the following question	s by placing an Y in the appropriate boy
Please indicate answers to the following questions by placing an X in the appropriate box.		
1.	Have you ever been convicted of a felony?	Yes □ No □
2. Within the last ten years, have you ever been convicted of a misdemeanor involving a firearm or other deadly weapon, gaming or gaming-related activities, violations of the Gambling Control Act, or dishonesty or moral turpitude, not including convictions that have been expunged or dismissed as provided by law?  Yes □ No □		
3.	Have you ever had a third party proposition gambling license, a key employee license, of suitability revoked?	
4.	Have you every had an application denied player registration or under the Gambling	
SECTION 2. DECLARATION		
I declare under penalty of perjury under the laws of the State of California that the foregoing information, and all information submitted with this form is true, correct, and complete.		
Applicant Signature: Date:		
Title:		

\*Disclosure of your U.S. social security account number is mandatory. Section 30 of the Business and Professions Code, section 17520 of the Family Code, and Public Law 94-455 (42 USC § 405(c)(2)(C)) authorize collection of your social security account number. Your social security account number will be used exclusively for tax enforcement purposes, for purposes of compliance with any judgment or order for child or family support in accordance with section 17520 of the Family Law Code. If you fail to disclose your social security account number, your application will not be processed and you may be reported to the Franchise Tax Board, which may assess a \$100 penalty against you.